Fill in this in	nformation to ider	ntify your case and this filing:			
Debtor 1	Derrick	L. Guinn			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse, if filin	g) First Name	Middle Name Last Name			
United States E	Bankruptcy Court for the	e: SOUTHERN DIST. OF MISSISSIPPI			
Case number	18-50848		_		
(if known)	10 000 10		_	if this is an ed filing	
			•		
Official For	m 106A/B				
Schedule /	A/B: Property			12/15	
filing together, to sheet to this for Part 1:	both are equally response. On the top of any percentage in the second s	hink it fits best. Be as complete and accurate a possible for supplying correct information. If mo additional pages, write your name and case nu idence, Building, Land, or Other Real I equitable interest in any residence, building, la	re space is needed, attach a smber (if known). Answer eve	separate ry question.	
ш	o to Part 2. Where is the property?				
1.1. 23 Guinn Rd Street address, if available, or other description		What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?	
Hattiesburg	MS 3940	1 Manufactured or mobile home	\$150,000.00	\$150,000.00	
City FORRREST	State ZIP Co	de ☐ Land ☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ole, tenancy by the	
County		Who has an interest in the property?	- Homestead		
3BR 2BA HOM RD, HATTIESE	ME LOCATED AT 23 BURG	Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth	Check if this is comm (see instructions)	unity property	
		Other information you wish to add abo property identification number:	ut this item, such as local	_	
		on you own for all of your entries from Part 1, in hed for Part 1. Write that number here		\$150,000.00	
Part 2: D	escribe Your Veh	icles			
-		quitable interest in any vehicles, whether they a bullease a vehicle, also report it on Schedule G: E.	_	•	
3. Cars, vans,	, trucks, tractors, spo	rt utility vehicles, motorcycles			
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 Derrick	L. Guinn	Ca	ase number (if known) 18-5	50848
Othe 200	el: r: roximate mileage: er information: 1 Ford Explorer es) Not Running Watercraft, aircr	r (approx. 350000) aft, motor homes, ATV	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) and other recreational vehicles, other venal watercraft, fishing vessels, snowmobiles,	amount of any secured cla Creditors Who Have Clain Current value of the entire property? Franchiscolor shicles, and accessories	
5.			own for all of your entries from Part 2, inc r Part 2. Write that number here		\$500.00
Pa	art 3: Descr	ribe Your Personal	and Household Items		
Do y			nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	Is and furnishings appliances, furniture, li	nens, china, kitchenware		
7.	Electronics Examples: Telev	isions and radios; audio	pplies and appliances , video, stereo, and digital equipment; computed by the page of the		\$2,500.00
8.	✓ No ☐ Yes. Describ Collectibles of v Examples: Antique	e alue ues and figurines; painti	devices including cell phones, cameras, med ngs, prints, or other artwork; books, pictures, collections; other collections, memorabilia, c	or other art objects;	
9.	Examples: Sport	ports and hobbies s, photographic, exercis	e, and other hobby equipment; bicycles, pool y tools; musical instruments	l tables, golf clubs, skis;	
10.	No No Pres. Describ		y tools, musical institutionits		
. •.		-	nunition, and related equipment		
11.	_ N.	day clothes, furs, leathe	er coats, designer wear, shoes, accessories		
	□ No □ Yes. Describ	e Clothing and n	ersonal items		\$500.00

Deb	otor 1 Derrick L. Guinn		Case number (if known) _	18-50848
12.	Jewelry Examples: Everyday jewelry, costum gold, silver	ne jewelry, engagement rings, wedding ring	s, heirloom jewelry, watches, g	ems,
	✓ No ☐ Yes. Describe			
13.	Non-farm animals Examples: Dogs, cats, birds, horses			
	✓ No ☐ Yes. Describe			
14.	Any other personal and household did not list	items you did not already list, including	any health aids you	
	☑ No			
	Yes. Give specific information			
15.	Add the dollar value of all of your eattached for Part 3. Write the number	entries from Part 3, including any entries ber here	for pages you have	\$3,000.00
Pá	art 4: Describe Your Finan	cial Assets		
Doy	you own or have any legal or equita	ble interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your vegetition	wallet, in your home, in a safe deposit box,	and on hand when you file you	r
	☑ No □ Yes		Cash:	
17.	,	ner financial accounts; certificates of depos ther similar institutions. If you have multipl		
	☐ No			
	✓ Yes	Institution name:		
	17.1. Checking account:	CSFCU checking		\$5.00
	17.2. Savings account:	Savings account @ CSFCU		\$5.00
18.		raded stocks accounts with brokerage firms, money mark	et accounts	
	✓ No ✓ YesInstitutio	n or issuer name:		
19.	Non-publicly traded stock and inte an interest in an LLC, partnership,	rests in incorporated and unincorporate and joint venture	d businesses, including	
	✓ No Yes. Give specific information about			
	them Name of	entity:	% of ownersh	nip:

Deb	tor 1	Derrick L. Guinn		Case number (if known)	18-50	848
20.	Negoti	able instruments include pers	and other negotiable and non-negotiable in onal checks, cashiers' checks, promissory not se you cannot transfer to someone by signing of	es, and money orders.		
	inf	o es. Give specific ormation about em Issuer r	name:			
21.		ment or pension accounts ples: Interests in IRA, ERISA, profit-sharing plans	Keogh, 401(k), 403(b), thrift savings accounts	, or other pension or		
		o es. List each count separately. Type of a	ccount: Institution name:			
22.	Your sl	· · ·	ts bu have made so that you may continue service ds, prepaid rent, public utilities (electric, gas, w		;	
	✓ No					
22	_	S	Institution name or individual:	ifo or for a number of year	۵)	
23.	☑ No)	periodic payment of money to you, either for li	re or for a number or year	5)	
	_	slssuerr				
24.		sts in an education IRA, in a s.C. §§ 530(b)(1), 529A(b), an	n account in a qualified ABLE program, or ud 529(b)(1).	ınder a qualified state tu	ition pro	ogram.
	✓ No		on name and description. Separately file the re	ecords of any interests. 1	1 U.S.C.	§ 521(c)
25.		s, equitable or future interes s exercisable for your bene	ts in property (other than anything listed in lift	line 1), and rights or		
	✓ No)				
	_	es. Give specific ormation about them				
26.			rade secrets, and other intellectual property websites, proceeds from royalties and licensin			
	✓ No ☐ Ye info	o es. Give specific ormation about them				
27.		ses, franchises, and other goles: Building permits, exclusion	eneral intangibles ve licenses, cooperative association holdings,	liquor licenses, profession	nal licen	ses
		es. Give specific ormation about them				
Mor	ney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you				
	□ No					*. *
	Yes. Give specific information Federal: Federal Return. Amt: \$5,000.00 about them, including whether		JO	Federal		
	yo	u already filed the returns d the tax years	Federal: Earned Income Credit. Amt: \$	5,000.00	State:	\$5,000.00 \$0.00
			State: State Tax Refund. Amt: \$5,000.0	00	Local:	φυ.υυ

Deb	otor 1 Derrick L. Guinn	Case number (if known) _	18-50848
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, mair	ntenance, divorce settlement, p	property settlement
	✓ No ✓ Yes. Give specific information	Alimony:	
		Maintenance	
		Support:	
		Divorce settl	ement:
		Property set	tlement:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sic compensation, Social Security benefits; unpaid loans you made to security benefits.		
	✓ No✓ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); c	credit, homeowner's, or renter's	insurance
	✓ No Yes. Name the insurance company of each policy and list its value	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance entitled to receive property because someone has died	policy, or are currently	
	✓ No✓ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed a lawsuit or mac Examples: Accidents, employment disputes, insurance claims, or rights to sue		
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including counterights to set off claims	erclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including any entries attached for Part 4. Write that number here		→ \$15,010.00
Pa	art 5: Describe Any Business-Related Property You Own or I	Have an Interest In. List	any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related	I property?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.		

Deb	tor 1 Derrick L. Guinn	Case number (if known)18-	50848
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe		
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices	x machines, rugs, telephones,	
	✓ No Yes. Describe		
40.	$\label{eq:machinery} Machinery, fixtures, equipment, supplies you use in business, and tools of your property of the prope$	your trade	
	✓ No ☐ Yes. Describe		
41.	Inventory		
	✓ No Yes. Describe		
42.	Interests in partnerships or joint ventures		
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:	
43.	Customer lists, mailing lists, or other compilations		
	No Yes. Do your lists include personally identifiable information (as defined No Yes. Describe	d in 11 U.S.C. § 101(41A))?	
44.	Any business-related property you did not already list		
	✓ No ☐ Yes. Give specific information.		
45.	Add the dollar value of all of your entries from Part 5, including any entries fattached for Part 5. Write that number here		\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Pr If you own or have an interest in farmland, list it in Part 1.	roperty You Own or Have	an Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial	ial fishing-related property?	
	✓ No. Go to Part 7.✓ Yes. Go to line 47.		
47	Form animale		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish		
	✓ No		
	Yes		

Debt	tor 1 Derrick L. Guinn	Case number (if known)	18-50848
48.	Cropseither growing or harvested		
	✓ No ☐ Yes. Give specific information		
49.	Farm and fishing equipment, implements, machinery, fixtures	s, and tools of trade	
	✓ No ☐ Yes		
50.	Farm and fishing supplies, chemicals, and feed		
	✓ No ☐ Yes		
51.	Any farm- and commercial fishing-related property you did no	ot already list	
	✓ No Yes. Give specific information		
52.	Add the dollar value of all of your entries from Part 6, includir attached for Part 6. Write that number here		→ \$0.00
Pa	nrt 7: Describe All Property You Own or Have an I	nterest in That You Did Not List A	bove
53.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	st?	
	No ✓ Yes. Give specific information. Household tools		\$50.00
	mower and lawn tools		\$250.00
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here	→ \$300.00
Pa	art 8: List the Totals of Each Part of this Form		
55.	Part 1: Total real estate, line 2		→ \$150,000.00
56.	Part 2: Total vehicles, line 5	\$500.00	
57.	Part 3: Total personal and household items, line 15	\$3,000.00	
58.	Part 4: Total financial assets, line 36	\$15,010.00	
59.	Part 5: Total business-related property, line 45	\$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61.	Part 7: Total other property not listed, line 54	+\$300.00	
62.	Total personal property. Add lines 56 through 61	\$18,810.00 Copy personal property total	→ + \$18,810.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62		\$168,810.00

Debtor 1 Derrick L. Guinn Case number (if known) 18-50848

Fill in this inf	ormation to iden	tify your ca	se:					
Debtor 1	Derrick First Name	L. Middle Name	Guin Last N					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last N	lame				
1	nkruptcy Court for the				SIP	PI		
Case number (if known)	18-50848				_		Check if this is an amended filing	
Official Form	106C							
Schedule C:	The Property	/ You Clai	m as Exe	empt			04/	16
Using the property space is needed, fi write your name an	you listed on Schedu Il out and attach to thi d case number (if kno	rle A/B: Propert is page as man own).	y (Official Form y copies of <i>I</i>	m 106A Part 2: /	/B) : Add	as your source, list t itional Page as nec	responsible for supplying correct information per property that you claim as exempt. If more sary. On the top of any additional pages,	re
is to state a specific exempted up to the receive certain be exemption of 100%	ic dollar amount as e amount of any app nefits, and tax-exem 6 of fair market valu	exempt. Alter plicable statute pt retirement t e under a law	natively, you ory limit. Son undsmay bo that limits the	may cl me exer e unlim e exem	aim npti ited ptio	the full fair market ionssuch as those I in dollar amount. n to a particular do	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an llar amount and the value of the ble statutory amount.	
Part 1: Ide	ntify the Propert	y You Clain	n as Exemp	pt				_
1. Which set of	exemptions are you	claiming?	Check one o	only, ev	en i	f your spouse is filing	g with you.	
لك ا	claiming state and fed claiming federal exem				U.S	S.C. § 522(b)(3)		
2. For any propo	erty you list on Sche	edule A/B that	you claim as	exemp	t, fi	II in the information	below.	
•	of the property and li lists this property	th	urrent value on the portion you will write the contract of the			unt of the nption you claim	Specific laws that allow exemption	
		С				ck only one box for exemption		
Brief description: 3BR 2BA HOME HATTIESBURG Line from Schedule	LOCATED AT 23 (GUINN RD,	\$150,000.0		_	\$70,027.35 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-21	
Brief description: 2001 Ford Explo Not Running Line from Schedule	rer (approx. 35000	00 miles)	\$500.00	_	_	\$500.00 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)	
(Subject to ad	ning a homestead ex justment on 4/01/19 a you acquire the prop	and every 3 yea	rs after that fo	or cases				

Debtor 1 Derrick L. Guinn Case number (if known) 18-50848 Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$2,500.00 \$2,500.00 Miss. Code Ann. § 85-3-1(a) $\overline{\mathbf{Q}}$ Furnishings supplies and appliances 100% of fair market value, up to any Line from Schedule A/B: applicable statutory limit Brief description: Miss. Code Ann. § 85-3-1(a) \$500.00 \$500.00 $\overline{\mathbf{Q}}$ Clothing and personal items 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$5,000.00 Miss. Code Ann. § 85-3-1(j) \$5,000.00 $\overline{\mathbf{Q}}$ **Federal Return** 100% of fair market value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: \$5,000.00 \$5,000.00 Miss. Code Ann. § 85-3-1(k) ablaState Tax Refund 100% of fair market value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: \$5,000.00 \$5,000.00 Miss. Code Ann. § 85-3-1(i) $\overline{\mathbf{V}}$ **Earned Income Credit** 100% of fair market П value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: \$50.00 \$50.00 Miss. Code Ann. § 85-3-1(a) $\overline{\mathbf{Q}}$ Household tools 100% of fair market value, up to any Line from Schedule A/B: 53 applicable statutory limit Brief description: \$250.00 \$250.00 Miss. Code Ann. § 85-3-1(a) \square mower and lawn tools 100% of fair market value, up to any Line from Schedule A/B: 53 applicable statutory limit

	ormation to identif					
	Douriek I	y your case:				
Debtor 1	Derrick I First Name	liddle Name	Guinn Last Name			
Debtor 2 (Spouse, if filing)	First Name N	fiddle Name	Last Name			
United States Bar	kruptcy Court for the:	SOUTHERN D	ST. OF MISSISSIPP	ı		
Case number	18-50848					
(if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Cla	ims Secured by	y Property		12/1
On the top of any and the top of any and the top of any credit	d accurate as possible. If more space is ne additional pages, write ors have claims secures this box and submit to the secure of	eded, copy the your name and ed by your prop	Additional Page, fill it d case number (if kno perty?	out, number the entri vn).	es, and attach it to thi	s form.
	in all of the information		ourt with your other sen	eddies. Tod nave nou	ing cise to report on the	13 101111.
Part 1: List	All Secured Clair	ns				
claim, list the c creditor has a	ed claims. If a creditor creditor separately for e particular claim, list the ble, list the claims in all e.	ach claim. If mo other creditors i	re than one n Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$79,972.65	\$150,000.00	
Ditech Financial Creditor's name	LLC		OME LOCATED AT			
PO Box 6172 Number Street		_ 23 GUINN R _	D, HATTIESBURG			
PO Box 6172 Number Street	SD 57700	As of the dat	e you file, the claim is	: Check all that apply.		
PO Box 6172	SD 57709 State ZIP Code	As of the dat Continger	e you file, the claim is	: Check all that apply.		
PO Box 6172 Number Street Rapid City City Who owes the deb	State ZIP Code	As of the dat Continger Unliquida Disputed Nature of lier	e you file, the claim is nt ted n. Check all that apply	.,,		
PO Box 6172 Number Street Rapid City City	State ZIP Code	As of the dat Continger Unliquida Disputed Nature of lier An agree	e you file, the claim is not ted 1. Check all that apply ment you made (such a	s mortgage or secured	car loan)	
PO Box 6172 Number Street Rapid City City Who owes the deb ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D	State ZIP Code t? Check one. ebtor 2 only	As of the dat Continger Unliquida Disputed Nature of lier An agreer Statutory Judgmen	e you file, the claim is nt ted n. Check all that apply	s mortgage or secured	car loan)	
PO Box 6172 Number Street Rapid City City Who owes the deb ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D	State ZIP Code t? Check one. ebtor 2 only the debtors and anothe laim relates	As of the dat Continger Unliquida Disputed Nature of lier An agreer Statutory Judgmen	e you file, the claim is not ted 1. Check all that apply ment you made (such a lien, not lien from a lawsuit cluding a right to offset)	s mortgage or secured	car loan)	

Official Form 106D

all pages. Write that number here:

If this is the last page of your form, add the dollar value totals from

\$79,972.65

Debtor 1 Derrick L. Guinn			Case number (if known) 18-50848		
Part	2: List Others to Be Noti	fied for a	Debt That Yo	u Already Listed	
examp then lis list the	le, if a collection agency is trying t st the collection agency here. Simi	o collect fro larly, if you	m you for a deb have more than	uptcy for a debt that you already listed in Part 1. For t you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, ns to be notified for any debts in Part 1, do not fill out or	
1	Dean Morris LLC			On which line in Part 1 did you enter the creditor?	2.1
	Name 855 S Pear Orchard Rd Number Street			Last 4 digits of account number	_
	Ste 404 Bldg 400			<u></u>	
				<u> </u>	
	Ridgeland City	MS State	39157 ZIP Code	<u></u>	
2	Dean Morris LLC			On which line in Bort 1 did you enter the graditor?	2.1
	Name 239 Oliver Rd			On which line in Part 1 did you enter the creditor?	
	Number Street			Last 4 digits of account number	-
				<u> </u>	
	Monroe	LA	71201		
	City	State	ZIP Code		
3	Ditech Financial LLC			On which line in Part 1 did you enter the creditor?	2.1
	Name Bankruptcy Dept			Last 4 digits of account number	_
	Number Street PO Box 44265			<u></u>	
				<u> </u>	
	Jacksonville	FL	32231	<u> </u>	
	City	State	ZIP Code		

Fill in this inf	ormation to id	entify your ca	se:			
Debtor 1	Derrick	L.	Guinn			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for	the: SOUTHERN	N DIST. OF MISSISSIPPI			
Case number (if known)	18-50848				Check if this amended filing	
Official Form	106E/F					
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
Do not include an If more space is n to this page. On t	y creditors with p eeded, copy the F	artially secured of Part you need, fill litional pages, wr	nd on Schedule G: Executory Co claims that are listed in Schedule it out, number the entries in the ite your name and case number of ecured Claims	D: Creditors Who F boxes on the left. A	lold Claims Sec	cured by Property.
1. Do any credit	tors have priority	unsecured claim	s against you?			
√ No. Got			G			
Yes.						
claim. For ea show both pric more space is claim, list the	ch claim listed, ide prity and nonpriorit s needed for priority other creditors in F	ntify what type of y amounts. As mu y unsecured claim Part 3.	reditor has more than one priority uclaim it is. If a claim has both prior uch as possible, list the claims in a s, fill out the Continuation Page of instructions for this form in the inst	ity and nonpriority am phabetical order acco Part 1. If more than o	nounts, list that coording to the cree	laim here and ditor's name. If
(i o. a op.a.	idiidii di dadii typo	o. o.a, 0000		Total claim	Priority	Nonpriority
					amount	amount
2.1						
Priority Creditor's Nam	ie		Last 4 digits of account number			
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that an	nlv.	
			Contingent	ioi oncon an anar ap	۲۰٫۰	
			Unliquidated			
City	State 2	ZIP Code	Disputed			
Who incurred the	debt? Check or	ne.	Type of PRIORITY unsecured cla	nim:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only	Nahitan Olasaha		Taxes and certain other debts		nent	
Debtor 1 and D	Debtor 2 only the debtors and a	nother	Claims for death or personal in	njury while you were		
_	claim is for a com		intoxicated Other. Specify			
Is the claim subje			LI Caron Speeding			
□ No						
Yes						

Debtor 1	Derrick L. Guinn	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
3. Do any	y creditors have nonpriority unsecured	claims against you?
	 You have nothing to report in this part es 	. Submit this form to the court with your other schedules.
If a cre type of	ditor has more than one nonpriority unse claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
		Total claim
4.1 Comprehe	ensive Rad Services	Last 4 digits of account number
Nonpriority Cr	editor's Name	When was the debt incurred?
5000 W Fo	Street	As of the date you file, the claim is: Check all that apply.
		_ Contingent
		✓ Unliquidated✓ Disputed
Hattiesbu		
City Who incurr	State ZIP Code ed the debt? Check one.	Type of NONPRIORITY unsecured claim:
Debtor		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce
Debtor		that you did not report as priority claims
ш	1 and Debtor 2 only one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
_	if this claim is for a community debt	Other. Specify
_	n subject to offset?	Medical Bill
✓ No	i subject to onset:	
Yes		
4.2		
	amaina Rad Camaiana	\$361.25
	ensive Rad Services reditor's Name	_ Last 4 digits of account number0_ 2_ 8_ 3_
5000 W Fo		When was the debt incurred?
Number	Street	 As of the date you file, the claim is: Check all that apply. □ Contingent
		Unliquidated
Hattiesbu	rg MS 39402	Disputed
City	State ZIP Code	Type of NONPRIORITY unsecured claim:
	ed the debt? Check one.	☐ Student loans
Debtor Debtor		Obligations arising out of a separation agreement or divorce
	2 only 1 and Debtor 2 only	that you did not report as priority claims
_	one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify
Check	if this claim is for a community debt	Medical Bill
_	subject to offset?	
✓ No ☐ Yes		
⊔ Amanda €	- Luinn	

After listing any entries on this page, number them sequentially from the previous page. 4.3 \$761.25 Amily Health Center	Debtor 1 Derrick L. Guinn	Case number (if known)18-50848	
As of the date you file, the claim is: Check all that apply. State ZiP Code Check one. Check if this claim is for a community debt is the claim subject to offset? State ZiP Code Check one. Check if this claim is for a community debt Check one.	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Samily Health Center Last 4 digits of account number Monprointy Creditor's Name 66 Old Airport Rd		em sequentially from the	Total claim
Nonpriority Creditor's Name 66 Old Airport Rd Number Street Street Street Contingent Uniquidated Disputed Disputed Type of NoNPRIORITY unsecured claim:	4.3		\$761.25
Street S		Last 4 digits of account number	
Number Street S	'	When was the debt incurred?	
Hattiesburg MS 39401 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another State state claim subject to offset? No Pos Box 5524 Number Street Sioux Falls SD 57117-5524 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Size of Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts or pension or profit-sharing plans, and other similar debts Debts or pension or profit-sharing plans, and other similar debts Debts or pension or profit-sharing plans, and other similar debts Debts or pension or profit-sharing plans, and other similar debts Size or Nonpriority Creditor's Name Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor		As of the date you file, the claim is: Check all that apply.	
Hattiesburg MS 39401 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 3 and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes Stouck Falls SD 57117-5524 □ Check one. □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 and Debtor 3 and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Check if this claim 2 is for a community debt is the claim subject to offset? □ No □ Ves □ No □ Ves □ No □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Credit Card □ Debtor 4 only □ Credit Card □ Debtor 5 to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Credit Card □ Debtor 1 only □ Credit Card □ Debtor 1 only □ Credit Card □ Debtor 1 only □ Credit Card			
Hattiesburg MS 39401 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt as the claim subject to offset? Monpriority Creditor's Name PO Box 5524 Number Street Sioux Falls SD 57117-5524 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name PO Box 5524 Number Street Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecu			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Who may be student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical account \$506.48 \$506.48 First Premier Bank Nonpriority Creditor's Name PO Box 5524 Number Street Who incurred the debt? Check if this claim is for a community debt late a poly. City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt late that one of the debtors and another Check if this claim is for a community debt late that one of the debtors and another Check if this claim is for a community debt late that one of the debtors and another Check if this claim is for a community debt late that subject to offset? No No			
Debtor 1 only		••	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Street □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Street □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ No □ Yes □ No	_ 5		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Ves □ Ves □ Ves □ Verentians □ Verent	Debtor 2 only		
Check if this claim is for a community debt Is the claim subject to offset? ✓ No			
Is the claim subject to offset? No	—		
No		Medical account	
\$506.48 A.4 Signature S			
First Premier Bank Nonpriority Creditor's Name PO Box 5524 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	= .,		
First Premier Bank Nonpriority Creditor's Name PO Box 5524 Number Street Sioux Falls City Who incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	4.4		\$506.49
Nonpriority Creditor's Name PO Box 5524 Number Street Sioux Falls City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	First Premier Bank	Last 4 digits of account number 5 0 0 2	\$300.48
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Nonpriority Creditor's Name		
Sioux Falls Sioux			
Sioux Falls Sioux	Number Street	<u> </u>	
Sioux Falls City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No		•	
City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ☐ Credit Card Type of NONPRIORITY unsecured claim: ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ☐ Credit Card	Sioux Falls SD 57117-5524	— Disputed	
 ✓ Debtor 1 only ✓ Debtor 2 only ✓ Debtor 1 and Debtor 2 only ✓ At least one of the debtors and another ✓ Check if this claim is for a community debt Is the claim subject to offset? ✓ No Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card 	•	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No	- Debteck and a set	☐ Student loans	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	L		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No	□	· · · · · · · · · · · · · · · · · · ·	
Is the claim subject to offset? ✓ No	At least one of the debtors and another		
☑ No		Credit Card	
Tes	✓ NO Yes		

Debtor 1 Derrick L. Guinn	Case number (if known)18-50848	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the Total cla	aim
4.5	\$2,80	66.73
Forrest General	Last 4 digits of account number 7 6 4 1	
Nonpriority Creditor's Name PO Box 24023	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Dept 25	Contingent	
	☑ Unliquidated	
Jackson MS 39225-4023	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
_	Medical account	
Is the claim subject to offset? ✓ No		
Yes		
4.6	\$87	20.00
Hattiesburg Clinic	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
415 S 28th Ave Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
	☑ Unliquidated	
Hattiesburg MS 39401	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Dbligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
_	Other. Specify	
Check if this claim is for a community debt	Medical account	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		

Debtor 1	Derrick L. Guinn	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin previous p	g any entries on this page, number the age.	m sequentially from the Total claim	
4.7		\$20.	90
HRRG		Last 4 digits of account number 8 5 8 2	
Nonpriority C	reditor's Name	When was the debt incurred?	
PO Box 4	Street	As of the date you file, the claim is: Check all that apply.	
		_ ☐ Contingent	
		Unliquidated	
Sunrise	FL 33345-9080	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	☐ Student loans	
☑ Debtor		Obligations arising out of a separation agreement or divorce	
Debtor	2 only 1 and Debtor 2 only	that you did not report as priority claims	
_	t one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	if this claim is for a community debt	Other. Specify	
_	•	South MS ER Phy	
No No	n subject to offset?		
Yes			
4.8		\$640.	00
Network	Services, Inc	Last 4 digits of account number	_
	reditor's Name	When was the debt incurred?	
PO Box 1 Number	Street	As of the date you file, the claim is: Check all that apply.	
Number	Gueet	Contingent	
		☐ Unliquidated	
Hattia alam	NO 20400	Disputed	
Hattiesbu City	I rg MS 39403 State ZIP Code	Type of NONDRIORITY unsecured claim:	
	red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor	1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor		that you did not report as priority claims	
_	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	t one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt	Collection account	
	n subject to offset?		
☑ No			
Yes			
Judgmen	t		

Debtor 1	Derrick L. Guinn	Case number (if known) 18-50848	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listir	ng any entries on this page, number the page.	m sequentially from the	Total claim
4.9			\$3,775.00
One Mair	n Financial	Last 4 digits of account number 2 4 1 9	
Nonpriority C	Creditor's Name	When was the debt incurred?	
Number	well Blvd Street	As of the date you file, the claim is: Check all that apply.	
		_ ☐ Contingent	
		✓ Unliquidated	
Irving	TX 75039	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	rred the debt? Check one.	Student loans	
-	r 1 only	Obligations arising out of a separation agreement or divorce	
□ ~	r 2 only r 1 and Debtor 2 only	that you did not report as priority claims	
_	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	c if this claim is for a community debt		
_	m subject to offset?	Signature Idan	
✓ No	in subject to onset:		
Yes			
4.10			\$900.00
Republic		Last 4 digits of account number 0 6 6 8	
	Creditor's Name	When was the debt incurred?	
Number	Street Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Hattiesbu	ura MS 39401	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur	rred the debt? Check one.	☐ Student loans	
ш	r 1 only	Obligations arising out of a separation agreement or divorce	
- .	r 2 only	that you did not report as priority claims	
=	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	st one of the debtors and another	Other. Specify	
_	cif this claim is for a community debt	Signature loan	
	m subject to offset?		
✓ No			
☐ Yes			

Debtor 1	Derrick L. Guinn		Case number (if known)18-50848
Part 3:	List Others to B	e Notified Abo	ut a Debt That You Already Listed
For ex credite debts any de	cample, if a collection a or in Parts 1 or 2, then	gency is trying to list the collection a 1 or 2, list the add not fill out or subn	ified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. collect from you for a debt you owe to someone else, list the original agency here. Similarly, if you have more than one creditor for any of the litional creditors here. If you do not have additional parties to be notified for nit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
Name		, <u>-</u> :	
Number	outh Ogden St. Street		Line 4.9 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Buffalo City	NY State	14206 ZIP Code	Last 4 digits of account number
	reau Central		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1: Number	529 Street		Line 4.6 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Hattiesbu City	rg MS State	39403 ZIP Code	— Last 4 digits of account number
	onal Collection Bure	au	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 610 Walth Number	a m Way Street		Line 4.4 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Sparks City	NV State	89434 ZIP Code	— Last 4 digits of account number
Network (Collection Services		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1 Number	725 Street		Line 4.1 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Hattiesbu City	rg MS State	39403 ZIP Code	— Last 4 digits of account number
Plantation	n Billing Center		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 4: Number	59077 Street		Line 4.7 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Sunrise City	FL State	33345-9077 ZIP Code	— Last 4 digits of account number

Deptor 1 Derrick	CL. Guinn		Case number (if known) _18-50848
Part 3: List (Others to B	e Notified Abo	out a Debt That You Already Listed Continuation Page
South MS Emerge	ncy Physicia	ıns	On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 16987			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Hattiesburg City	MS State	39404-6987 ZIP Code	Last 4 digits of account number
Southeast Ms Rur	al Health		On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 1729			Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	MS	39403	— Last 4 digits of account number
City	State	ZIP Code	-

Debtor 1	Derrick L. Guinn	Case number (if known)	18-50848	
DODIO! !	Derrick E. Guilli	Case number (ii known)	10-30040	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom runt i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts		6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$11,352.51
	6j.	Total. Add lines 6f through 6i.	6j.	\$11,352.51

Fill in this inf				
Debtor 1	Derrick First Name	L. Middle Name	Guinn Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	SOUTHERN DIST	OF MISSISSIPPI	
Case number (if known)	18-50848			Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill	in this inf	ormation to	identify your case:		
Debt	tor 1	Derrick	L.	Guinn	
		First Name	Middle Name	Last Name	
Debt (Spo	tor 2 buse, if filing)	First Name	Middle Name	Last Name	
Unite	ed States Ba	nkruptcy Court f	or the: SOUTHERN DIS	T. OF MISSISSIPF	PPI
	e number	18-50848			<u>_</u>
	nown)	10 000 10			Check if this is an amended filing
	cial Form				
Sch	edule H:	Your Coc	lebtors		12/1
neede page.	ed, copy the On the top	Additional Pag of any Additior	e, fill it out, and number nal Pages, write your nar	the entries in the bone and case number	oplying correct information. If more space is boxes on the left. Attach the Additional Page to this ler (if known). Answer every question.
	0o you have ☑ No ☑ Yes	any codebtors	? (If you are filing a joint	i case, do not list eith	ther spouse as a codebtor.)
	nclude Arizon	a, California, Id	•		r territory? (Community property states and territories Rico, Texas, Washington, and Wisconsin.)
<u> </u>			ormer spouse, or legal equ	uivalent live with you a	u at the time?
	□ No □ Yes				
p c	erson show reditor on S	n in line 2 agai schedule D (Off	n as a codebtor only if th	nat person is a guara ule E/F (Official Forr	a codebtor if your spouse is filing with you. List the trantor or cosigner. Make sure you have listed the trantor or Schedule G (Official Form 106G). Use
	Column 1:	Your codebto	r		Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1	Amanda	Guinn			Schedule D, line
	Name 23 Guinn	Rd			
	Number	Street			<u> </u>
					Schedule G, line One Main Financial
	Hattiesbu City	urg	MS State	39401 ZIP Code	
3.2	Amanda	Guinn			Schedule D, line
	Name 23 Guinn	Rd			
	Number	Street			<u></u>
					Schedule G, line Republic Finance
	Hattiesbu City	ırg	MS State	39401 ZIP Code	поравно і нанов

		identify your case:	_				
Debtor 1	Derrick First Name	L. Middle Name	Guinn Last Name			- Che	eck if this is:
Debtor 2						- I	An amended filing
(Spouse, if filing)	First Name		Last Name				A supplement showing postpetition
United States Ban			DIST. OF MISSI	SSIP	PI	_	chapter 13 income as of the following date
Case number (if known)	18-5084	8		_			MM / DD / VVVV
Official Form 1	061						MM / DD / YYYY
Schedule I: Y		me					12/1
include information about your spouse. your name and case	about your s	pouse. If you are separ ce is needed, attach a se known). Answer every o	ated and your spo eparate sheet to th	use	s not filin	g with y	spouse is living with you, you, do not include information any additional pages, write
1. Fill in your emp	·	oyinent .					
information.	noyment		Debtor 1				Debtor 2 or non-filing spouse
If you have more job, attach a sep		Employment status	✓ Employed				☐ Employed
with information	about		☐ Not employ	ed			✓ Not employed
additional emplo	yers.	Occupation	Disabled				
Include part-time or self-employed		Employer's name					
Occupation may student or home applies.		Employer's address	Number Street				Number Street
			City		State Zip	o Code	City State Zip Code
		How long employed t	here?				
Part 2: Give	Dotoile Ak	out Monthly Incom	•				
		bout Monthly Incom		ina ta	ronort for	د مصدر انصم	a write CO in the appear Include your
non-filing spouse unle		-	n. II you have nou	ing ic	report for	any inte	e, write \$0 in the space. Include your
		ve more than one employ parate sheet to this form.	er, combine the info	ormat	ion for all	employe	ers for that person on the lines below. If
					For Deb	tor 1	For Debtor 2 or non-filing spouse
		salary, and commissions d monthly, calculate what		2.		\$0.00	\$0.00
3. Estimate and lis	st monthly o	vertime pay.		3	+	\$0.00	\$0.00

Official Form 106l Schedule I: Your Income page 1

Calculate gross income. Add line 2 + line 3.

\$0.00

\$0.00

Deb	tor 1	Derrick L. Guinn		Case num	nber (if known) 18	-50848
			Fo	or Debtor 1	For Debtor 2 or non-filing spouse	•
	Сор	y line 4 here	4.	\$0.00	\$0.00	_
5.	List	all payroll deductions:		_		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b.	Mandatory contributions for retirement plans	5b	\$0.00	\$0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e.	Insurance	5e	\$0.00	\$0.00	
	5f.	Domestic support obligations	5f	\$0.00	\$0.00	
	5g.	Union dues	5g	\$0.00	\$0.00	
	5h.	Other deductions. Specify:	5h. +	\$0.00	\$0.00	
6.	Add 5g +	I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$0.00	\$0.00	
7.	-	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List	all other income regularly received:	-	· · · · · · · · · · · · · · · · · · ·		
		Net income from rental property and from operating a business, profession, or farm	8a	\$0.00	\$0.00	
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b.	Interest and dividends	8b.	\$0.00	\$0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$1,789.00	\$0.00	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d.	Unemployment compensation	8d.	\$0.00	\$0.00	
	8e.	Social Security	8e.	\$0.00	\$0.00	
	8f.	Other government assistance that you regularly receive	_			
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
		Specify:	8f.	\$0.00	\$0.00	
	8g.	Pension or retirement income	 8g.	\$0.00	\$0.00	
	8h.	Other monthly income.	-	· · · · · · · · · · · · · · · · · · ·		
		Specify: See continuation sheet	_ ^{8h.} +	\$787.00	\$0.00	1
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,576.00	\$0.00	
10.	Cal d	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,576.00	+ \$0.00	= \$2,576.00
11.	Inclu	te all other regular contributions to the expenses that you list in Stude contributions from an unmarried partner, members of your househods or relatives.			r roommates, and ot	her
	Do r	not include any amounts already included in lines 2-10 or amounts tha	at are not	available to pay e	expenses listed in Sc	hedule J.
	Spe	cify:			11.	+ \$0.00
12.		I the amount in the last column of line 10 to the amount in line 11.				\$2,576.00
		applies.		2.2.2.2.2.2.	,	Combined monthly income

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Debtor 1			Derrick L. Guinn		Case number (if known)	18-50848	
13.	Doy	ou/	expect an	increase or decrease within the year after you file this form?			
		No.		See continuation sheet.			
	$\overline{\mathbf{V}}$	Yes	s. Explain:				

Official Form 106l Schedule I: Your Income page 3

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Debtor 1	Derrick L. Guinn		Case nui	mber (if known) 18-508	348
8h. Other	Monthly Income (details)		For Debtor 1	For Debtor 2 or non-filing spouse	
SNAI	• • •		\$187.00		
Rent			\$600.00		
		Totals:	\$787.00	\$0.00	

13. Expected increase or decrease within the year after you file this form: Debtor has a Social Security Disability hearing in July, 2018.

F	ill in this inform	nation to iden	tify your c	ase:					
		Derrick	ı				ck if this		
	Debtor 1	First Name	Middle N	Guin Name Last N			A supp	ended filing lement showing	
ı	Debtor 2 (Spouse, if filing)	First Name	Middle N	Name Last N	ame			r 13 expenses a ng date:	s or the
	United States Bankr	uptcy Court for the	ne: SOUTH	ERN DIST. OF MI	SSISSIPPI		MM / D	DD / YYYY	_
	Case number (if known)	18-50848						_,	
Of	fficial Form 10)6J				_			
Sc	chedule J: Yo	our Expens	es						12/15
cor nar	rect information. In	f more space is	needed, attac nswer every (ch another sheet to	ling together, both ar this form. On the top				
1.	Is this a joint cas								
2.	_ No	Debtor 2 live in a	file Official Fo		es for Separate Housel				
	Do not list Debtor Debtor 2.	1 and		out this information ependent	Dependent's relation Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you?
	Do not state the denames.	ependents'							Yes No Yes No Yes No Yes No No No No Yes No Yes
3.	Do your expense expenses of peopy yourself and your	ole other than	☑ No ☐ Yes						L Tes
Р	art 2: Estima	ate Your Ong	oing Montl	nly Expenses					
to r		of a date after t	he bankrupto	•	are using this form as a supplemental Sche			-	
				ent assistance if you I: Your Income (Off	u know the value of icial Form 106I.)			Your expens	ses
4.	The rental or hon Include first mortg	•						4.	
	If not included in	line 4:							
	4a. Real estate ta	axes						4a	
	4b. Property, hon	neowner's, or ren	ter's insuranc	е				4b	
	4c. Home mainte	nance, repair, ar	ıd upkeep exp	enses				4c	\$50.00
	4d Homeowner's	s association or c	ondominium c	lues				4d	

Deb	Derrick L. Guinn	Case number (if known)	18-50848
		Your e	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$250.00
	6b. Water, sewer, garbage collection	6b	\$40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$150.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies		\$250.00
8.	Childcare and children's education costs	- 8.	·
9.	Clothing, laundry, and dry cleaning	9.	\$50.00
10.	Personal care products and services	10.	\$75.00
11.	Medical and dental expenses	11.	\$200.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13	
14.	Charitable contributions and religious donations	14	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c	
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Debtor 1		Derrick L. Guinn	Case number (if known)	18-50848	
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.			
	20a. Mortgages on other property		20a		
	20b.	Real estate taxes	20b		
	20c.	Property, homeowner's, or renter's insurance	20c		
	20d.	Maintenance, repair, and upkeep expenses	20d		
	20e.	Homeowner's association or condominium dues	20e		
21.	Other	r. Specify: tag	21. +_	\$4.00	
22.	Calcu	alate your monthly expenses.			
	22a.	Add lines 4 through 21.	22a	\$1,169.00	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b		
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,169.00	
23.	Calcu	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,576.00	
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$1,169.00	
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$1,407.00	
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you f	ile this form?		
		xample, do you expect to finish paying for your car loan within the year or do you ex ent to increase or decrease because of a modification to the terms of your mortgage	. ,		
		No. Yes. Explain here: None.			

Fill in this information to identify your case:				
Debtor 1	Derrick First Name	L. Middle Name	Guinn Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	SOUTHERN DIST.	OF MISSISSIPPI	
Case number (if known)	18-50848			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$150,000.0
	1b. Copy line 62, Total personal property, from Schedule A/B	\$18,810.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$168,810.0
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
•	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$79,972.6
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$11,352.5
	Your total liabilities	\$91,325.10
P	art 3: Summarize Your Income and Expenses	
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,576.0
ı	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,169.0

Del	otor 1	Derrick L. Guinn	Case number (if known)18-50848			
P	Part 4: Answer These Questions for Administrative and Statis					
ŝ.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?				
		No. You have nothing to report on this part of the form. Check this box and sub Yes	mit this form to the court with your other schedules.			
7.	Wha	t kind of debt do you have?				
		Your debts are primarily consumer debts. Consumer debts are those "incurr family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic				
		Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.				
3.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$187.00					
9.	Сор	y the following special categories of claims from Part 4, line 6 of <i>Schedule</i> in	E/F:			
			Total claim			
	Fron	n Part 4 on Schedule E/F, copy the following:				
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00			
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>			
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00			
	9d.	Student loans. (Copy line 6f.)	\$0.00			
	9e.	Obligations arising out of a separation agreement or divorce that you did not reppriority claims. (Copy line 6g.)	ort as \$0.00			
	Of	Debte to pension or profit charing plane, and other similar debte. (Copy line 6h.)	\$0.00			

9g. Total. Add lines 9a through 9f.

\$0.00

Fill in this in	formation to i	dentify your case	:	
Debtor 1	Derrick First Name	L. Middle Name	Guinn Last Name	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
(Opouse, ii iiiiig	, i iist i vaine	Widdle Name	Last Name	
United States Ba	ankruptcy Court fo	r the: SOUTHERN D	IST. OF MISSISSIPPI	
Case number	18-50848			☐ Check if this is an
(if known)				amended filing
Official Form	106Dec			-
		ndividual Debt	or's Schedules	12/15
Deciaration	About an i	nuividuai Debi	or 3 ochedules	12/13
	gn Below		18 U.S.C. §§ 152, 1341, 1519,	
Did you pay	or agree to pay s	someone who is NOT	an attorney to help you fill ou	t bankruptcy forms?
☑ No				
☐ Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119).
Under penal		clare that I have read	the summary and schedules	filed with this declaration and that they are
X /s/ Derric	ck L. Guinn		X	
Derrick L.	Guinn, Debtor 1	_	Signature of Debtor 2	

Date <u>05/14/2018</u> MM / DD / YYYY

Date

MM / DD / YYYY

					_		
F	ill in this info	ormation to iden	tify your case:				
D	ebtor 1	Derrick First Name	L. Middle Name	Guinn Last Name			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			
U	nited States Bar	nkruptcy Court for the	: SOUTHERN DIS	ST. OF MISSISSIPPI			
_	ase number known)	18-50848				Check if this is an amended filing	
Of	ficial Form	107					
St	atement o	 f Financial Af	fairs for Indi	viduals Filing for B	ankruptcy		04/16
yοι	ır name and ca	se number (if knowr	n). Answer every o	eparate sheet to this form. (Juestion. atus and Where You Li		tional pages, write	
1.							
2.	 During the last 3 years, have you lived anywhere other than where you live now? ✓ No ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 						
3.	Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						
	✓ No✓ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).						

Debtor 1 Derrick L. Guinn			Case number (if known)				
Pá	art 2:	Explain the Sources of Y	our Income				
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						lendar years?	
	☐ No ✓ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
		ry 1 of the current year until u filed for bankruptcy:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips		
	,		Operating a business		Operating a business		
		calendar year:	☐ Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips		
(Jan	nuary 1 to	December 31,	Operating a business		Operating a business		
For	the cale	ndar year before that:	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips		
(Jan	nuary 1 to	December 31, 2016)	Operating a business		Operating a business		
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royal and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.					wsuits; royalties;		
	List eac	ch source and the gross income fro	om each source separately.	Do not include income	that you listed in line 4.		
	☐ No ✓ Yes	s. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
		ry 1 of the current year until u filed for bankruptcy:	SNAP	\$935.00			
		calendar year: December 31, 2017)	SNAP	\$2,244.00			
-	-	YYYY					
		endar year before that: December 31, 2016)	SNAP	\$2,244.00			
,	,	, <u>2010 /</u>					

Debtor 1		Derrick l	L. Guinn	Case number (if known)18-50848
Р	art 3:	List Co	ertain Payments You Made Before You Fil	ed for Bankruptcy
6.	Are eith	er Debtor	1's or Debtor 2's debts primarily consumer debts?	
	□ No.		Debtor 1 nor Debtor 2 has primarily consumer debid by an individual primarily for a personal, family, or he	ts. Consumer debts are defined in 11 U.S.C. § 101(8) as busehold purpose."
		During	the 90 days before you filed for bankruptcy, did you pa	y any creditor a total of \$6,425* or more?
		□ No.	Go to line 7.	
		☐ Yes	List below each creditor to whom you paid a total of stotal amount you paid that creditor. Do not include p child support and alimony. Also, do not include payr	ayments for domestic support obligations, such as
		* Subje	ct to adjustment on 4/01/19 and every 3 years after tha	t for cases filed on or after the date of adjustment.
	✓ Yes	. Debtor	1 or Debtor 2 or both have primarily consumer deb	ts.
		During	the 90 days before you filed for bankruptcy, did you pa	y any creditor a total of \$600 or more?
		☑ No.	Go to line 7.	
		☐ Yes	List below each creditor to whom you paid a total of screditor. Do not include payments for domestic suppalso, do not include payments to an attorney for this	ort obligations, such as child support and alimony.
7.	Insiders corporat agent, ir	include you ions of what including or	our relatives; any general partners; relatives of any ger ich you are an officer, director, person in control, or ow	nt on a debt you owed anyone who was an insider? eral partners; partnerships of which you are a general partner; ner of 20% or more of their voting securities; and any managing U.S.C. § 101. Include payments for domestic support obligations
	☑ No ☐ Yes	. List all p	ayments to an insider.	
8.		year befo		nents or transfer any property on account of a debt that
	Include	payments	on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	. List all p	ayments that benefited an insider.	

Debtor 1	Derrick L. Guinn			Case numbe	r (if known) <u>18-5</u>	0848
Part 4:	Identify Legal Act	ions, Reposs	sessions, and Fored	losures		
9. Within 1 List all s	year before you filed for	or bankruptcy, v ersonal injury cas	vere you a party in any es, small claims actions,	lawsuit, court action		
□ No ☑ Yes	. Fill in the details.					
Case title		Nature of the	case	Court or agency		Status of the case
Republic Fi	inance vs Derrick&	Civil judgme	ent	Justice Court of	of Forrest County	/ MS 5
Amanda Gu	uinn	, ,		Court Name	•	Pending
0	. D I- 0400 D 00	•		Number Street		
Case number	Book 3183 Page 29	<u>C</u>				Concluded
				City	State ZIP	Code
Case title		Nature of the	case	Court or agency		Status of the case
Network Se	ervices Inc	Civil Judgme	ent	Justice Court of	of Forrest county	MS Banding
				Court Name		Pending
						On appeal
Casa numba	. DV4 02 Dags 256			Number Street		— Concluded
Case number	DKt 93 Page 256	_				Concluded
				City	State ZIP	Code
seized, Check a	I year before you filed for levied? Ill that apply and fill in the Go to line 11. Fill in the information b	e details below.	vas any of your propert	y repossessed, forec	closed, garnished,	attached,
V 100		0.011.	Describe the property	,	Date	Value of the property
Danublia Fi			payroll	•		
Republic Fi Creditor's Name			-		2016	\$2,630.65
1715 Hardy	St Suite 50					
Number Stre			Explain what happen	ed		
			☐ Property was repos	ssessed.		
			Property was fored	losed.		
Hattiesburg	g MS	39401	Property was garni			
City	State	ZIP Code	Property was attac	hed, seized, or levied	•	

Deb	otor 1	Derrick L	Guinn			Case number (if ki	nown) 18-50848	
11.		-	-		ruptcy, did any creditor, including a b o make a payment because you owed		stitution, set off an	y
	✓ No	s. Fill in the	e details.					
12.		-	-		uptcy, was any of your property in the custodian, or another official?	possession of an	assignee for the be	enefit of
	✓ No							
P	art 5:	List Ce	ertain G	ifts and Co	ntributions			
13.	Within	2 years be	fore you	filed for bankı	ruptcy, did you give any gifts with a to	otal value of more t	han \$600 per perso	on?
	✓ No		e details fo	or each gift.				
14.		2 years be charity?	fore you	filed for bankı	ruptcy, did you give any gifts or contri	ibutions with a tota	al value of more tha	ın \$600
	✓ No		e details fo	or each gift or o	contribution.			
P	art 6:	List Ce	ertain L	osses				
15.		1 year befo	-		iptcy or since you filed for bankruptcy	y, did you lose any	thing because of th	eft, fire,
	✓ No	s. Fill in the	e details.					
P	art 7:	List Ce	ertain P	ayments or	Transfers			
16.	anyon	e you cons	ulted abo	out seeking ba	uptcy, did you or anyone else acting o nkruptcy or preparing a bankruptcy p preparers, or credit counseling agencies	etition?		•
	□ No ☑ Ye	s. Fill in the	e details.					
	vid L.Lo	ord and As	ssociate	s, P.A.	Description and value of any prope \$310.00 Filing fee	erty transferred	Date payment or transfer was made	Amount of payment
	308 West Pine St				_			
Num	nber St	reet			_			
Hat City	ttiesbui	rg	MS State	39401 ZIP Code	_			
Ema	mail or website address							
Pers	on Who I	Made the Pavi	erson Who Made the Payment if Not You					

Deb	tor 1	Derrick L. Guinn		Case number (i	f known)	3			
17.		-	ruptcy, did you or anyone else acting on your behalf pay or transfer any property to I with your creditors or to make payments to your creditors?						
	Do not	include any payment or transfer tha	t you listed on line 16.						
	✓ No ☐ Yes	s. Fill in the details.							
18.		Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?							
		Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	✓ No	s. Fill in the details.							
19.		10 years before you filed for banle a beneficiary? (These are often			trust or similar dev	ice of which			
	✓ No ☐ Yes								
P	art 8:	List Certain Financial Ac	counts. Instruments. Sa	afe Deposit Boxes, a	nd Storage Units	•			
	houses, pension funds, cooperatives, asso No Yes. Fill in the details.		ociations, and other financial in	estitutions.		·			
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
		nbelt FCU cial Institution	_		or transferred				
IVali	ic or r iriari	olar moditation	XXXX	☑ Checking	3/ 2018	_			
Num	Number Street		-	Savings Money market Brokerage Other					
City		State ZIP Code	_						
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	ncock E	Sank cial Institution	_						
			XXXX		4/2017				
Number Str		eet	-	☐ Money market ☐ Brokerage ☐ Other					
City		State ZIP Code	_						

Deb	otor 1	Derrick L. Guinn	Case number (if known)18-50848	
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	cy, any safe deposit box or other depository	
	✓ No ☐ Yes	. Fill in the details.		
22.	✓ No	ou stored property in a storage unit or place other than your home with . Fill in the details.	hin 1 year before you filed for bankruptcy?	
Р	art 9:	Identify Property You Hold or Control for Someone Else	•	
23.	-	hold or control any property that someone else owns? Include any pr in trust for someone.	roperty you borrowed from, are storing for,	
	✓ No ☐ Yes	. Fill in the details.		
Р	art 10:	Give Details About Environmental Information		
For	the purp	ose of Part 10, the following definitions apply:		
	hazardou	nental law means any federal, state, or local statute or regulation conc is or toxic substance, wastes, or material into the air, land, soil, surfac a statutes or regulations controlling the cleanup of these substances, v	e water, groundwater, or other medium,	
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or	
		<i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic	
Rep	oort all no	otices, releases, and proceedings that you know about, regardless of v	when they occurred.	
24.	Has any law?	governmental unit notified you that you may be liable or potentially li	iable under or in violation of an environmental	
	✓ No ☐ Yes	. Fill in the details.		
25.	☑ No	ou notified any governmental unit of any release of hazardous material . Fill in the details.	1?	
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and	
	✓ No ☐ Yes	. Fill in the details.		

Deb	otor 1	Derrick L. Guinn	Cas	e number (if known) 18-50848
Р	art 11:	Give Details About Your Busines	s or Connections to Any B	usiness
27.	Within d	4 years before you filed for bankruptcy, did ss?	you own a business or have any	of the following connections to any
		A sole proprietor or self-employed in a trade A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equi	C) or limited liability partnership (LL of a corporation	
	سخا	None of the above applies. Go to Part 12. Check all that apply above and fill in the determine the control of	tails below for each business.	
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties		anyone about your business? Include
	□ No □ Yes	s. Fill in the details below.		
Р	art 12:	Sign Below		
that pro	t answer perty by	the answers on this <i>Statement of Financial</i> is are true and correct. I understand that marked in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571.	aking a false statement, conceal	ng property, or obtaining money or
-		ck L. Guinn X	Signature of Debtor 2	
		Guinn, Debtor 1	-	
	Date	<u>05/14/2018 </u>	Date	
Did	you atta	ch additional pages to Your Statement of F	inancial Affairs for Individuals Fi	ing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay	or agree to pay someone who is not an att	orney to help you fill out bankru	otcy forms?
V		,		
	Yes. Na	me of person		_Attach the Bankruptcy Petition Preparer's Notice, _ Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test-*-deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/Ban

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF MISSISSIPPI GULFPORT DIVISION

ln	re Derrick L. Guinn	Case No.	18-50848
		Chapter	13
	DISCLOSURE OF COMPENSATION OF	ATTORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify th that compensation paid to me within one year before the filing of the poservices rendered or to be rendered on behalf of the debtor(s) in contains as follows:	etition in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	1,100.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		1,100.00
2.	The source of the compensation paid to me was:		
	✓ Debtor ☐ Other (specify)		
3	The source of compensation to be paid to me is:		
Ο.	☐ Debtor ☐ Other (specify) MS Ctr for Legal Services		
4.	I have not agreed to share the above-disclosed compensation wit associates of my law firm.	th any other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with ar associates of my law firm. A copy of the agreement, together with compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal ser	rvice for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy;	the debtor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affair	irs and plan which may l	pe required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation of Debtor(s) in adversary proceedings. Fees and costs associated with pre-filing Credit Counseling and post-filing Financial Managment courses. Any Costs associated with filing Judgment Lien avoidance Orders in Chancery and Circuit courts.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/14/2018 /s/ David L. Lord

Date

David L. Lord
David L.Lord and Associates, P.A.
808 West Pine St
Hattiesburg, Ms 39401

Phone: (601) 583-6132 / Fax: (601) 582-5627

Bar No. 1427

/s/ Derrick L. Guinn

Derrick L. Guinn